

Town of Durham Fire Prevention Permit Application

Permit #:	_____	Work to start on:	_____	Fee:	_____
Issue Date:	_____	Inspection Date:	_____	Check #:	_____
Expiration Date:	_____	Paid or Bill To:	_____		

Select Permit Type

Assembly - Blasting - Haunted House - Open Flame (Single/Year) Pyrotechnic / Display Fireworks - Permissible Fireworks.

Maintenance Permits: Fire Alarm/Sprinkler/Standpipe/Suppression

Installations: Fire Alarm/LP Tank/Gas or Oil Burner

Scope of Work

Description: _____

Job Location: _____

Make and Serial of Oil or Gas Burner: _____

** Permit to install Oil/Gas Burning Equipment

The undersigned hereby applies for a permit to install and operate oil burning equipment in compliance with R.S.A. 153:5 and N.F.P.A. 31 or gas burning equipment in compliance with R.S.A. 3:5 and N.F.P.A. 54 and 58.

Owner Information

Owner: _____ Phone#: _____

Owner Address: _____ Stories: _____

Type of Occupancy: Residential Commercial University Other:

Contractor

Business Name: _____ Phone: _____

Address: _____ Fax: _____

City/State & Zip: _____ Insurance Carrier: _____

Installer
Permittee: _____
License
Cert NO: _____
Lic.
Expiration: _____

Notifications/Scheduling

PRIOR to work on any fire alarm please call

Strafford County Dispatch 603-742-4968

University Dispatch 603-862-1392

This permit does not take the place of any license or permits required by law. Permit is Non-Transferrable with any change in process, location, use of occupancy or dates, you will be required to obtain a new permit. When signed by a representative of the Durham Fire Department, this application becomes a temporary permit to conduct the activity described above. The activity described above must be conducted in with recognized codes; standards and safe workman like practices.

Permit to Operate Oil/Gas Burning Equipment

Permission is hereby granted to operate the oil/gas burning equipment as described above which has been inspected and found to be in compliance with the State Fire Code (Saf-C 6012.3) as adopted by the State Fire Marshal.

Fire Chief or Designee

Date

Signature of Permittee

Signature of DFD Representative